

CLAIMS ONLY							Application Number <div style="font-size: 1.2em; font-family: monospace;">10607994</div>	Filing Date
							Applicant(s)	
							* May be used for additional claims or amendments	
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
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Total Indep	2		2		2			
Total Depend	18		18		18			
Total Claims	20		20		20			
							* May be used for additional claims or amendments	
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Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
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Total Indep	2		2		2	
Total Depend	18		18		18	
Total Claims	20		20		20	

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	Indep	Depend	Indep	Depend	Indep	Depend
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Total Depend						
Total Claims						